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-	Substitute for form 1449A/PTO			Complete if Known			
				Application Number			
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	STATEMENT BY			First Named Inventor	Dominic	M Vaidez	
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	(Use as many sheets a	s necessary)		Examiner Name			
She		of	2.	Attorney Docket Number	DMV-	5	

			U. S. PATENT	DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (7 Incomp)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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PTO/SB/08a (08-03)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Complete if Known Substitute for form 1449A/PTO Application Number Filing Date INFORMATION DISCLOSURE First Named Inventor STATEMENT BY APPLICANT Vaidez Dominic Art Unit **Examiner Name** (Use as many sheets as necessary) Attorney Docket Number 2 DMV-5 Sheet **U.S. PATENT DOCUMENTS Publication Date** Name of Patentee or Pages, Columns, Lines, Where **Document Number** Initials* MM-DD-YYYY Applicant of Cited Document Relevant Passages or Relevant Number-Kind Code² (# known) Figures Appear US-6,325, 292 12-4-0 Selv all US-US- Application 2002/0069567 911 6-13-02 Marina US- Application 9-19-02 Vandrenil αll US-Application Ribando 2-20-03 US-2003/0033745 US-US-US-US-US-US-US-US-US-US-ÜS-US-**FOREIGN PATENT DOCUMENTS** Cite **Publication Date** Name of Patentee or Pages, Columns, Lines, Examiner Foreign Patent Document MM-DD-YYYY Applicant of Cited Document Where Relevant Passages Initials* No. Country Code¹ Number ⁴ Kind Code⁵ (if known) or Relevant Figures Appear

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